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For the following listed application(s), please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with:	
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The attached Request for Customer Number (PTO/SB/125) form.	
PATENT NUMBER (if known)	APPLICATION NUMBER
(ii Miewil)	10/692,782
Completed by (check one):	
Applicant/Inventor	/Gail C. Silver/
	Signature
Attorney or Agent of record 47,945 (Reg. No.)	Gail C. Silver Typed or printed name
	,, , , , , , , , , , , , , , , , , , ,
Assignee of record of the entire interest. See 37 CFR Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	Requester's telephone number
Assignee recorded at Reel Frame	Novemer 19, 2007
	Date
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more that one signature is required, see below*.	
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